Please type a	ı plus sign	(+) inside	this box
---------------	-------------	------------	----------

of

Sheet



PTO/SB/08A (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

substitute for form 1449A/PTO	Complet if Known		
NEODMATION DISCUSOR	Application Number		
NFORMATION DISCLOSURE	Filing Date		
STATEMENT BY APPLICANT	First Named Inventor	Carlos Cabrera, Jr.	
	Group Art Unit		
(use as many sheets as necessary)	Examiner Name		

**Attorney Docket Number** 

	U.S. PATENT DOCUMENTS							
Examiner Initials	Cite No.1	U.S. Patent Document  Kind Code <sup>2</sup> (if known)		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		5,732	,074	Spaur et al.				
	5,684,860		,860	Milani et al.				
		5,604	,676	Penzias				
				, , , , , , , , , , , , , , , , , , ,				
		<del>-</del>						
					<del>                                     </del>			
					<del>                                     </del>			
			<del></del>					
$\dashv$					<del>                                     </del>			
<del>-  </del>			<del>-    </del> -		+			

	FOREIGN PATENT DOCUMENTS									
Examiner Initials*	1	Foreign Patent Document			Name of Patentee or	Date of Publication of	Pages, Columns, Lines,			
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)	Applicant of Cited Document	Cited Document MM-DD-YYYY	Where Relevant Passages or Relevant Figures Appear	T6		
			· -		····································					
		<del>                                     </del>								
		<del>  </del>								
<b></b>		<del>  </del>			-			lacksquare		
		lL				1 1		i I		

Examiner	Date	
Signature	Considered	

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.